

AO 440 (Rev. 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Eastern District of Pennsylvania

LARRY CENTERS, MELVIN ALDRIDGE, PATRISE
ALEXANDER, CASSANDRA BAILEY,
INDIVIDUALLY AND AS THE REPRESENTATIVE OF
THE ESTATE OF JOHNNY BAILEY, RONNIE
COLEMAN, TIM DENTON, LELAND C. DOUGLAS,
JR., BALDWIN MALCOM FRANK, PATRICK
JACKSON, ERIC KELLY, EMANUEL MCNEIL,
ANTHONY E. NEWSOM, ROBERT POLLARD, ALLEN
RICE, TYRONE SMITH, PATSY LEWIS,
INDIVIDUALLY AND AS THE REPRESENTATIVE OF
THE ESTATE OF MARK LEWIS, CHRISTOPHER
CROOMS, BEN BRONSON, RICHARD JOHNSON

Plaintiff(s)

v.

Civil Action No. 2:12-cv-05042

RIDDELL SPORTS GROUP, INC.*Defendant(s)*

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

Riddell Sports Group, LLC
6255 North State Highway #300
Irving, Texas 76038

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

MICKEY WASHINGTON
5020 MONTROSE BLVD., SUITE 77006
HOUSTON, TX 77006

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: 1/14/2014



Signature of Clerk or Deputy Clerk

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Civil Action No. 12-5042

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for (name of individual and title, if any) Riddell Sports Group LLC
 was received by me on (date) 2/4/14

☐ I personally served the summons on the individual at (place) _____
 on (date) _____ ; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
 designated by law to accept service of process on behalf of (name of organization) _____
 on (date) _____ ; or

☐ I returned the summons unexecuted because _____ ; or

☒ Other (specify): Delivered by Certified Mail to 6255 North State
Hwy #306 Irving Tx 75038 on 2/7/14

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____

I declare under penalty of perjury that this information is true.

Date: 2/17/14

Susan Wyntjes

Server's signature

Susan Wyntjes Process Server

Printed name and title

306 Williamsport St League City Tx

Server's address

77573

Additional information regarding attempted service, etc:

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Moseley</u></p> <p>C. Date of Delivery <u>2-7-14</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>1. Article Addressed to:</p> <p><u>Riddell Sports Group Inc</u> <u>6255 North State Hwy #300</u> <u>Irving Tx 75038</u></p>		<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. <u>7011 2970 0000 3543 8303</u></p> <p>(Transfer from service label)</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

PS Form 3811, February 2004 Domestic Return Receipt Center 102595-02-M-1540